## **Late Contribution Report**

## Type or print in ink. Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

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NAME OF FILER LETICIA VASQUEZ-WILSON FOR SENATE 2019				Date of This Filing _	02/07/2019	Date Stamp		CALIFORNIA FORM 497		
		I.D. NUMBER (if applicable) 1415467		Report No2			For Official Use Only			
STREET ADDRESS				☐ Amendme		Page 1 of 2				
CITY STATE ZIP CODE Inglewood CA 90301			(explain below)  No. of Pages							
Late Contrib	ution(s) Received	I					·			
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			UTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)		l	MOUNT ECEIVED	
02/07/2019		ION OF STATE, COUNTY IANS FOR CLEAN AND F		LOYEES LOCAL	☐ IND ■ COM □ OTH □ PTY □ SCC			\$4,700.00	)	

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*Contributor Codes	
IND - Individual	PTY - Political Party
III III III III III III III III III II	1 1 1 Ontiodi l'arty
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
\ \ ' \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
OTH - Other	

Reason for Amendment:

FPPC Form 497(June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

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STREET ADDRESS				Amendment to Report No.	Page 2 of 2			
CITY STATE ZIP CODE Inglewood CA 90301			CODE 1	(explain below)  No. of Pages 2				
Late Contri	ibution(s) Mad	le						
DATE MADE	FULL NAME,	MAILING ADDRESS AND ZIP CODE OF (IF COMMITTEE, ALSO ENTER I.D. NUMBER		CANDIDATE AND OFFICE OR MEASURE AND JURISDICTIO	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)		

Reason for Amendment:

FPPC Form 497(June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC